

AO 446 (Rev. 06/12) Summons in a Civil Action

UNITED STATES DISTRICT COURT

for the

Northern District of Ohio

JOANNE M. BILBREY, INDIVIDUALLY AND AS
EXECUTOR OF THE ESTATE OF ROBERT L.
BILBREY, DECEASED

Plaintiff(s)

v.

PV HOLDING CORP, ET AL.

Defendant(s)

Civil Action No. 1:25-cv-00721

SUMMONS IN A CIVIL ACTION

To: *(Defendant's name and address)*

HUTCHINSON, INC.
C/O JAMES TODOROFF
460 FULLER AVENUE, N.E.
GRAND RAPIDS, MI 49503

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

KENNETH A. CALDERONE
HANNA, CAMPBELL & POWELL, LLP
3737 EMBASSY PARKWAY, SUITE 100
AKRON, OH 44333

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.



SANDY OPACICH, CLERK OF COURT

Date: 4/21/2025

s/ Jessica L. Hancock

Signature of Clerk or Deputy Clerk

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PROOF OF SERVICE

SENDER: COMPLETE THIS SECTION		COMPLETE THIS SECTION ON DELIVERY	
<p>■ Complete items 1, 2, and 3.</p> <p>■ Print your name and address on the reverse so that we can return the card to you.</p> <p>■ Attach this card to the back of the mailpiece, or on the front if space permits.</p>		<p>A. Signature <input checked="" type="checkbox"/> <i>Marie Boyd</i> <input type="checkbox"/> Agent <input type="checkbox"/> Addressee</p>	
<p>1. Article Addressed to:</p> <p>Hutchinson, Inc. c/o James Todoroff 460 Fuller Ave., N.E. Grand Rapids, MI 49503</p>		<p>B. Received by (Printed Name) <i>Marie Boyd</i></p>	<p>C. Date of Delivery <i>5-9-25</i></p>
<p>2. Article Number (Transfer from service label)</p> <p>7022 3330 0001 4427 8204</p>		<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES, enter delivery address below: <input type="checkbox"/> No</p>	
<p>3. Service Type</p> <p><input type="checkbox"/> Adult Signature <input type="checkbox"/> Adult Signature Restricted Delivery <input checked="" type="checkbox"/> Certified Mail® <input checked="" type="checkbox"/> Certified Mail Restricted Delivery <input type="checkbox"/> Collect on Delivery <input type="checkbox"/> Collect on Delivery Restricted Delivery <input type="checkbox"/> Insured Mail <input type="checkbox"/> Insured Mail Restricted Delivery (over \$500)</p>		<p><input type="checkbox"/> Priority Mail Express® <input type="checkbox"/> Registered Mail™ <input type="checkbox"/> Registered Mail Restricted Delivery <input checked="" type="checkbox"/> Signature Confirmation™ <input checked="" type="checkbox"/> Signature Confirmation Restricted Delivery</p>	
<p>PS Form 3811, July 2020 PSN 7530-02-000-9053</p>		<p>Domestic Return Receipt</p>	

My fees are \$ _____ for travel and \$ _____ for services, for a total of \$ 0.00

I declare under penalty of perjury that this information is true.

Date: _____

Server's signature

Printed name and title

Server's address

Additional information regarding attempted service, etc: